

Utah Insurance Department
State Office building, Rm 3110
Salt Lake City, UT 84114
801-538-3800
Meldee Love

BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF UTAH

COMPLAINANT:	:	NOTICE OF INFORMAL
	:	AGENCY ACTION
UTAH INSURANCE DEPARTMENT	:	AND ORDER
	:	
RESPONDENT:	:	
	:	Docket No. 2015-126 PC
Security Planning & Insurance Corporation	:	
1307 South 1100 East	:	Enf. Case No. 3686
Spanish Fork UT 84660	:	Judge Mark Kleinfeld
License No. 416769	:	Administrative Law Judge
	:	

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Ann. §§ 31A-2-201 and 63G-4-201 and Utah Admin. Code R590-160. Based upon information contained in agency files or known to the Commissioner, the Commissioner makes the following:

FINDINGS OF FACT

1. Respondent is an insurance agent authorized to do the business of insurance in the State of Utah holding License number 416769.
2. Respondent failed to properly respond to an inquiry of the Commissioner dated 9/2/2015.
3. Thereafter, Respondent was required, by certified letter dated 9/25/2015, to provide a substantive response to the Commissioner's initial inquiry on or before 9/30/2015.

4. As of the date of this Notice of Informal Adjudicative Proceeding and Order, no response has been received and the time for response and any extensions granted has expired.

Having entered his Findings of Fact, the Commissioner now enters his:

CONCLUSION OF LAW

1. In failing to submit a timely response to an inquiry from the Commissioner, the Respondent violated Utah Code Ann. § 31A-2-202(4).

Based upon the foregoing Findings of Fact and Conclusions of Law, the Commissioner now enters the following:

ORDER

IT IS HEREBY ORDERED:

1. Respondent is assessed an administrative forfeiture in the amount of \$500.00. Said forfeiture shall be paid no later than ten (10) days after the date this Order becomes final.

2. Respondent shall provide a substantive response to the Commissioner's inquiries to be received in the offices of the Utah Insurance Department no later than ten (10) days after the date this Order becomes final.

3. This Order shall become final fifteen (15) days after the date of mailing unless a written request for a hearing is received from the Respondent in the offices of the department prior to that date. A written request for a hearing shall be signed by the person making the request and shall state the basis for the relief requested.

NOTIFICATION

If you request a hearing regarding this matter, please contact Linda Hardy, at 801-538-3860. Failure to request a hearing will be considered a failure to exhaust administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to \$2,500.00 per violation and the suspension or revocation of your license and the filing of an action to enforce this Order in District Court, which may impose forfeitures of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED THIS 5 day of October, 2015.

TODD E. KISER
INSURANCE COMMISSIONER

A handwritten signature in blue ink, reading "Mark E. Kleinfeld", is written over a horizontal line.

MARK KLEINFELD
Administrative Law Judge
Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800

CERTIFICATE OF MAILING

The undersigned certifies on this date, a true and correct copy of the forgoing NOTICE OF INFORMAL AGENCY ACTION AND ORDER was mailed, postage prepaid, to the following:

Security Planning & Insurance Corporation

Attn: Jeniffer Huff

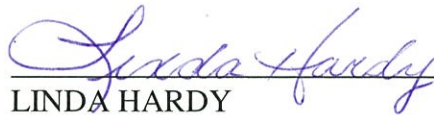
1307 South 1100 East

Spanish Fork UT 84660

&

JENIFFER.HUFF@SECURITYPLANNING.COM

DATED this 5Th day of October, 2015.



LINDA HARDY

UTAH INSURANCE DEPARTMENT

STATE OFFICE BUILDING, ROOM 3110

SALT LAKE CITY, UT 84114-6901



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

Insurance Department

UTAH Invoice - Original

SECURITY PLANNING & INSURANCE CORPORATION
1307 SOUTH 1100 EAST
SPANISH FORK UT 84660

Printed Date: October 5, 2015
Invoice Date: October 5, 2015
Balance Due: \$500.00
Due Date: November 9, 2015
Invoice ID: 805399
Payor ID: 169380

Date	Item Description	Amount	
10-05-2015	Monetary Penalty Agency	\$500.00	E-Case 3686 Docket 2015-126 PC

No Adjustments

No Payments

Balance Amount Due \$500.00

UTAH Invoice - Original

Make check payable to: Utah Insurance Department
Send payment to:
Utah Insurance Department
3110 State Office Building
Salt Lake City, UT 84114-6901

Invoice Date: October 5, 2015
Balance Due: \$500.00
Due Date: November 9, 2015
Invoice ID: 805399
Payor ID: 169380

E-Case 3686 Docket 2015-126 PC

Detach and Return this Voucher with Payment
Payments Will Not Be Processed without Voucher